Fill	in this information to	o identify your c	ase:									
De	btor 1	Kareem San	nuel			_						
1 -	btor 2 buse, if filing)					_						
Un	ited States Bankrup	tcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA		_						
Ca	se number 19-	16607					Chec	k if this is	:			
(If k	nown)			-				ın amende	ed filing			
_										ng postpetition ollowing date:		
	fficial Form						N	1M / DD/ \	YYYY			
S	chedule I: `	Your Inc	ome								12/1	
atta	ch a separate shee	et to this form.	ir spouse is not filing w On the top of any additi									
١.	information.	oyin <del>e</del> nt		Debtor 1	Debtor 1				Debtor 2 or non-filing spouse			
	If you have more attach a separate		Employment status	■ Employed				☐ Employed				
	information about		p.oyo o.u.uo	□ Not employed				☐ Not e	mployed			
	employers.		Occupation	Auto Painter								
	Include part-time, self-employed wo		Employer's name	Bryn Mawr Auto	body							
	Occupation may is or homemaker, if		Employer's address	713 W. Haverford	d Road	i						
			How long employed t	here? 15 years	3			_				
Pa	rt 2: Give Det	tails About Moi	nthly Income									
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to re	port for	any lin	e, write	e \$0 in the	space. Inc	clude your no	n-filing	
-	ou or your non-filing e space, attach a se	•	ore than one employer, co	ombine the information	for all e	employ	ers for	that perso	on on the li	nes below. If	you need	
						F	For De	btor 1		btor 2 or ing spouse		
2.			ry, and commissions (b calculate what the monthl		2.	\$_	7	,742.00	\$	N/A	-	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$_		0.00	+\$	N/A	-	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	7.7	42.00	\$	N/A		

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Kareem Samuel		C	Case number (if kno	wn)	19-16	607		
					For Debtor 1			Debtor		
	0	us line 4 have	4		¢ 7.740			filing s		
	Cop	y line 4 here	4.		\$7,742.0	00	\$		N/A	<u> </u>
5.	l ist	all payroll deductions:								
٥.		• •	Fo		¢ 4.070	~~	¢.		N1/A	
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 1,978.0		\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b			00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 108.0		\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$ 165.0		\$		N/A	_
	5e.	Insurance	5e		\$ 374.0		\$		N/A	_
	5f.	Domestic support obligations	5f.		. —	00	\$		N/A	_
	5g.	Union dues	5g			00	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h	.+		00	+ \$		N/A	<u>-</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 2,625.		\$		N/A	<u>-</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$5,117.0	00	\$		N/A	<u>-</u>
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business,								
		profession, or farm Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$ 0.0	00	\$		N/A	
	8b.	Interest and dividends	8b			00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent								_
		regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce	_		•		•			
	٠.	settlement, and property settlement.	8c.		\$ 0.0		\$		N/A	
	8d.	Unemployment compensation	8d			00	\$		N/A	
	8e.	Social Security	8e		\$0.0	00	\$		N/A	<u>.                                    </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance								
		that you receive, such as food stamps (benefits under the Supplemental								
		Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.		\$ 0.0	00	\$		N/A	
	8g.	Pension or retirement income	8g		\$ 0.0	00	\$		N/A	<u> </u>
	8h.	Other monthly income. Specify: tax refund	8h	.+	\$ 750.	00	+ \$		N/A	
				Γ.						
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	750.	00	\$		N/	A
			г							_
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	5,867.00	- \$		N/A	= \$	5,867.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L							
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.							
		ude contributions from an unmarried partner, members of your household, your		ende	ents, your roomm	ates	, and			
		er friends or relatives.								
	_	not include any amounts already included in lines 2-10 or amounts that are not	availa	able	to pay expense:	s liste	ed in S			0.00
	Spe	city:						11.	+5	0.00
12	Δdd	the amount in the last column of line 10 to the amount in line 11. The res	ult ic	tha	combined month	alv in	como			
12.		e that amount on the Summary of Schedules and Statistical Summary of Certai								
	appl	•					,	12.	\$	5,867.00
								l	Combi	nod
										ly income
13.	Do	you expect an increase or decrease within the year after you file this form	?							,
		No.								
	$\overline{}$	Yes Explain:								

Fill	in this informa	tion to identify yo	our case:						
	otor 1	Kareem Sam				Cł		this is: amended filing	
1	otor 2 ouse, if filing)								ving postpetition chapter the following date:
Unit	ted States Bankr	uptcy Court for the	EASTE	RN DISTRICT OF PENNS	SYLVANIA		MN	I / DD / YYYY	
	nown)	)-16607							
Ot	fficial Fo	rm 106J							
S	chedule	J: Your I	Exper	ises					12/1
Be info nur	as complete a ormation. If m mber (if know	and accurate as	possible.	If two married people a ch another sheet to this					
Par 1.	t 1: Descr Is this a join	ibe Your House	hold						
١.	No. Go to								
		s Debtor 2 live i	n a separ	ate household?					
	□ N	0	-						
	☐ Ye	es. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of D	ebtor :	2.	
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?
	Do not state dependents				Son			8	□ No ■ Yes
					Daughter			12	□ No ■ Yes
					Son			16	□ No ■ Yes
									■ res
_	_								☐ Yes
3.	expenses of	enses include f people other th d your depender	han $_{f \Box}$	No Yes					
Est	imate your ex		our bankru	y Expenses uptcy filing date unless y is filed. If this is a sup					
the		n assistance and		government assistance luded it on <i>Schedule I:</i>				Your expe	enses
(0		···,							
4.		or home owners and any rent for the		ses for your residence. r lot.	Include first mortgage	e 4.	\$_		1,265.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.			0.00
		rty, homeowner's				4b.	· : —		185.00
		maintenance, re owner's associati		ipkeep expenses dominium dues		4c. 4d.	· : —		0.00 0.00
5.				our residence, such as h	ome equity loans		\$ -		0.00

Deb	otor 1 Kareem Samuel	Case numl	oer (if known)	19-16607
3.	Utilities:			
٥.	6a. Electricity, heat, natural gas	6a.	\$	355.00
	6b. Water, sewer, garbage collection		\$	120.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	499.00
		6d.		
			·	0.00
	Food and housekeeping supplies	7.	\$	1,000.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	300.00
0.	Personal care products and services	10.	\$	225.00
1.	Medical and dental expenses	11.	\$	100.00
2.	Transportation. Include gas, maintenance, bus or train fare.	40	Φ.	240.00
	Do not include car payments.	12.	·	240.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
1.	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	·	0.00
<b>.</b>	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		•	0.00
•	Specify:	16.	\$	0.00
7.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.		0.00
	17d. Other. Specify:	17d.		0.00
2	Your payments of alimony, maintenance, and support that you did not report		Ψ	0.00
٠.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106		\$	0.00
9	Other payments you make to support others who do not live with you.	.,.	\$	0.00
•	Specify:	19.	Ψ	0.00
)	Other real property expenses not included in lines 4 or 5 of this form or on Se		ur Income	
<i>,</i> .	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	·	0.00
		20b. 20c.	·	
	20c. Property, homeowner's, or renter's insurance		· —	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
	Other: Specify:	21.	+\$	0.00
2.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,289.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	.2	\$	7,203.00
		_	· <u> </u>	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,289.00
3.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,867.00
	23b. Copy your monthly expenses from line 22c above.	23b.	·	4,289.00
	200. Copy your monthly expenses from fine 220 above.	200.	<b>—</b>	4,203.00
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	1,578.00
	Journa your monthly not mount.	-		
4.	Do you expect an increase or decrease in your expenses within the year after	you file this	form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect y			ease or decrease because of a
	modification to the terms of your mortgage?			
	■ No.			
	Yes. Explain here:			